

EXHIBIT 4

We make prescription opioids. And we want to limit their use.

For more than 25 years, Purdue Pharma has developed opioid medications. While opioid analgesics may help patients with acute and chronic pain when other treatment options are inadequate, earlier this year we decided that our sales representatives will no longer promote opioids to prescribers.

We are acutely aware of the public health risks opioid analgesics can create, even when taken as prescribed. And we are deeply concerned about the toll the opioid crisis is having on individuals and communities across the nation, and as a company now led by a physician, we believe the country needs a new approach to prescribing opioids.

This approach includes supporting patient access to multi-modal pharmacologic and non-pharmacologic treatment options; ensuring opioids are only used when alternative treatment options are inadequate; and *adopting public policies aimed at reducing addiction, abuse, diversion, and overdose related to opioids.*

To help limit a patient's unnecessary exposure to opioids and reduce the number of unused opioids that might end up in the wrong hands, we support initiatives to limit initial opioid prescriptions to no more than seven days.

To help reduce prescription drug abuse and diversion, we advocate that prescribers and pharmacists consult state Prescription Drug Monitoring Program (PDMP) databases before writing or dispensing any opioid prescription. Studies suggest that PDMPs can help reduce the number of prescriptions written for opioids and that PDMP use is associated with a reduction in pain medications received for nonmedical use from multiple doctors.^{1,2}

To support communities that have been affected by the crisis, we've provided funding to the National Sheriffs' Association to help law enforcement distribute the overdose rescue drug naloxone. In addition, we're helping to bring prescription abuse prevention education to high school students across the country.

America's opioid crisis is the result of multiple factors. We believe that all stakeholders — healthcare leaders, drug manufacturers, policymakers, and public health officials — need to come together to drive meaningful solutions forward. While no single intervention alone will solve this crisis, partnerships, determination, and innovative approaches are steps in the right direction.



We manufacture prescription opioids.

How could we not help fight the prescription and illicit opioid abuse crisis?

Two doctors founded a company in 1892 now known as Purdue Pharma. Continuing the strong heritage of a research-driven, science-based company, another doctor is currently at the helm as CEO. We're the pharmaceutical company that manufactures OxyContin®. Patients' needs and safety have guided our steps. It's what led us to research and develop medications to help patients. Today, it's what has spurred us to redouble our efforts in the fight against the prescription and illicit opioid abuse crisis. It's why we're taking action.

We support recommendations in *The President's Commission on Combating Drug Addiction and the Opioid Crisis* and the FDA's *Opioid Action Plan*. There are too many prescription opioid pills in people's medicine cabinets. We support initiatives to limit the length of first opioid prescriptions. Reducing the number of excess tablets won't end the epidemic, but we believe it will help rein in the problem. We believe doctors should check their state Prescription Drug Monitoring Program (PDMP) databases before writing an opioid prescription, to guard against doctor-shopping by those trying to game the system. Information sharing between state databases must improve.

Our industry and our company have and will continue to take meaningful action to reduce opioid abuse. We focused our talented research scientists and applied our innovative thinking to making opioids with abuse-deterrent properties, making them harder to crush and, therefore, harder to be abused by snorting or injection. With this investment, we pioneered the pharmaceutical industry's movement toward developing opioids with abuse-deterrent properties when we were the first to receive FDA approval.¹ Developing new formulations is risky and there are never any guarantees, but we did it anyway. Our company also took the initiative to distribute the CDC Guideline for Prescribing Opioids to thousands of prescribers and pharmacists shortly after it was released.

As we continue to fight the prescription opioid and illicit substance abuse crisis, we are applying our resources and our best scientific minds to discover and develop new, non-opioid pain medicines for patients.

No one solution will end the crisis, but multiple, overlapping efforts will. We want everyone engaged to know you have a partner in Purdue Pharma. This is our fight, too.



ADVERTISEMENT



We Manufacture Prescription Opioids, and We'll Continue Our Work to Address the Opioid Crisis



Helping patients by making medicines is what we do at Purdue Pharma, and it was the principle upon which physician brothers founded the company. We are currently developing medications to help patients dealing with cancer and central nervous system disorders, while continuing our historic focus on pain management.

Our company makes OxyContin®. While opioid pain medication can help

patients with acute and chronic pain when other treatment options are inadequate, we are aware of the risks opioid pain medicines can create: even when taken as prescribed, they carry risks of addiction, abuse, and misuse that can lead to overdose and death. Earlier this year we ended our practice of promoting opioid medications to prescribers through sales representatives.

Because we are deeply concerned about the toll the opioid crisis is having on individuals and communities across the nation, we think it is important to share some of the measures we support to help address the prescription and illicit opioid abuse crisis.

- We support initiatives to limit initial opioid prescriptions to no more than seven days. This will help limit unnecessary exposure to opioids and reduce the number of unused opioids that might end up in the wrong hands.
- We advocate that prescribers and pharmacists consult state Prescription Drug Monitoring Program (PDMP) databases, which track controlled substance prescriptions in a state, before writing or dispensing any opioid prescription. Studies suggest that PDMPs can help reduce the number of prescriptions written for opioids and that PDMP use is associated with a reduction in pain medications received for nonmedical use from multiple doctors.^{1,2} To aid in this effort, we provided funding to the National Association of Boards of Pharmacy to enable states to connect to a platform and share PDMP data with other states at no cost, which complemented the company's early efforts of advocating for PDMP use.
- We encourage increased adoption of electronic prescribing of controlled substances to help reduce diversion. Unlike traditional paper prescriptions, electronic prescriptions can't be copied or stolen, and they're more difficult to alter or forge.^{3,4}
- We urge everyone to learn more about safer storage of prescription opioids to reduce the likelihood of diversion and misuse. Medication

Guides for opioids include information about safe storage and what to do with any remaining or unused pills after someone stops taking them.

- We joined the Prescription Drug Safety Network, a public-private initiative created by EVERFI, to support school-based prevention education efforts, and we encourage additional organizations to join as well.

America's opioid crisis is the result of multiple factors. We believe that everyone involved — physicians, healthcare leaders, drug manufacturers, drug distributors and retailers, policymakers, law enforcement, and public health officials — need to come together to drive meaningful solutions forward. While no single intervention alone will solve this crisis, partnerships, determination, and innovative approaches are steps in the right direction.

¹ Bao Y, Pan Y, Taylor A. Prescription drug monitoring programs are associated with sustained reductions in opioid prescribing by physicians. *Health Affairs (Project Hope)*. 35(2016)1045–1051. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5336205/>. Accessed July 12, 2018.

² Ali MM, Dowd W, Classen T. Prescription drug monitoring programs, nonmedical use of prescription drugs, and heroin use: evidence from the National Survey of Drug Use and Health. *Addictive Behaviors*. 69(2017)65–77.

³ DrFirst. The evolving EPCS landscape: A prescription for stopping opioid abuse. Retrieved from: https://go.drfirst.com/hubfs/2016-03-24/2h8klr/8842/141586/EPCS_Whitepaper_DrFirst_3.2016.pdf.

⁴ Thomas CP, et al. Prescribers' expectations and barriers to electronic prescribing of controlled substances. *J Am Med Inform Assoc* 2012;19:375e381. doi:10.1136/amiajnl-2011-000209.

LEARN MORE



The news and editorial staffs of The New York Times had no role in this post's preparation.

© 2019 The New York Times
Company

| [Privacy](#) | [Terms of Service](#)

[Site Map](#) | [Help](#) | [Site Feedback](#)

ADVERTISEMENT



We Want to Help People Understand the Risks of Misusing Prescription Medications, Including Opioids.



Every day our nation faces tragic stories of struggles with opioid addiction and lives lost to prescription and illicit opioid overdose.

We are deeply concerned about the toll the opioid crisis is having on individuals and communities across the nation. As a manufacturer of prescription opioid medications, Purdue Pharma is committed to supporting meaningful solutions to address this crisis.

We want to help people — including young people — understand the risks of misusing prescription medications, including opioids. The National Institute on Drug Abuse, part of the National Institutes of Health, states, “after alcohol, marijuana, and tobacco, prescription drugs (taken nonmedically) are among the most commonly used drugs by 12th graders.”¹

That’s why we support school-based prevention education efforts, including being a member of the Prescription Drug Safety Network, a public-private initiative created by EVERFI, a leading prevention education innovator. The potential benefits of high school prevention education are significant, with school-based programs shown to save an estimated \$18 in substance-abuse-related medical care, state and local government costs, and lost productivity over a lifetime for every \$1 spent.^{2,3} Founded in collaboration with educators and prevention experts, and launched with support from members of the healthcare industry, as well as community and state leaders, this national coalition brings an innovative digital experience into the classroom that is designed to empower students with knowledge, skills, and strategies to help prevent prescription drug misuse and abuse. Real-world scenarios drive home the lessons and provide students with tips on how to spot and help a friend in trouble.

More than 57,000 students at more than 800 high schools nationwide accessed the digital Prescription Drug Safety prevention curriculum in the 2017-2018 academic year and increased their knowledge on six different learning modules — including the science of addiction, safe use, refusal skills, and supporting a friend — by an average of 49 percent.⁴

Nearly 100,000 students have already participated in this course in schools across the country through the efforts of the Network. We look forward to seeing the Network’s impact grow and to helping more students learn these valuable skills in the coming school year, and beyond.

We hope that others will embrace the importance of prevention-focused education. We urge you to learn more about the national initiative and help broaden the reach of [the Prescription Drug Safety Network](#).

While no one intervention alone will solve this crisis, partnerships, determination, and innovative approaches are steps in the right direction.

¹ National Institute on Drug Abuse. Misuse of Prescription Drugs. January 2018. Retrieved from <https://www.drugabuse.gov/publications/research-reports/misuse-prescription-drugs/summary>.

Accessed August 21, 2018.

² Substance Abuse and Mental Health Services Administration. Substance Abuse Prevention Dollars and Cents: A Cost-Benefit Analysis. Retrieved from <https://www.samhsa.gov/sites/default/files/cost-benefits-prevention.pdf>. Accessed August 21, 2018.

³ Prescription Drug Safety Network. The Case for Prescription Drug Education. Retrieved from http://info.everfi.com/rs/410-YCZ-984/images/White%20Paper_Case%20for%20Rx%20Drug%20Education.pdf. Accessed August 21, 2018.

⁴ Prescription Drug Safety Network. Prescription Drug Safety Course. K-12 Impact Report 2017-2018. Retrieved from <https://everfi.com/networks/prescription-drug-safety-network/impact/>. Accessed August 21, 2018.

LEARN MORE

The news and editorial staffs of The New York Times had no role in this post's preparation.

